

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | RH       |        | 6/20     |
| O.I.P.E. CLASSIFIER       |          |        |          |
| FORMALITY REVIEW          | sp       | 852    | 07-09-01 |
| RESPONSE FORMALITY REVIEW | TZ       | 947    | 09/25/01 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date |
|----------|------|
| Final    |      |
| Original |      |
| 1        | ✓    |
| 2        | ✓    |
| 3        | ✓    |
| 4        | ✓    |
| 5        | ✓    |
| 6        | ✓    |
| 7        | ✓    |
| 8        | ✓    |
| 9        | ✓    |
| 10       | ✓    |
| 11       | ✓    |
| 12       | ✓    |
| 13       | ✓    |
| 14       | ✓    |
| 15       | ✓    |
| 16       | ✓    |
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| 32       | ✓    |
| 33       | ✓    |
| 34       | ✓    |
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| 46       | ✓    |
| 47       | ✓    |
| 48       | ✓    |
| 49       | ✓    |
| 50       | ✓    |

| Claim    | Date |
|----------|------|
| Final    |      |
| Original |      |
| 51       | ✓    |
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| Claim    | Date |
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| Final    |      |
| Original |      |
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If more than 150 claims or 10 actions  
 staple additional sheet here.

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